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APPLICANTS

Bruce Ferguson, Round Rock, TX;

Eric Hartman, Austin, TX;

** CONTINUING DATA ***** *NONE MD*** FOREIGN APPLICATIONS ***** *NONE MD*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 35	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 4
Verified and Acknowledged	<i>[Signature]</i> Examiner's Signature	<i>[Initials]</i> Initials			

ADDRESS

Jeffrey C. Hood
 Conley, Rose, & Tayon, P.C.
 P.O. Box 398
 Austin, TX
 78767

TITLE

Pre-processing input data with outlier values for a support vector machine

FILING FEE RECEIVED 1184	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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